



**TOWN OF BAR HARBOR**  
**Application for Absentee Ballot**  
**June 8, 2010**  
**Annual Town Meeting**  
**School Budget Validation ONLY**

**Application Received**  
**(Date/Time)**

**Ballot Sent/Delivered**  
**(Date/Time)**

1. Full Name of Registered Voter \_\_\_\_\_
2. Residence Address of Voter \_\_\_\_\_  
(Street Address) (Municipality)
3. Voter's Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
m m d d y y y y
4. Daytime Phone Number (optional): \_\_\_\_\_
5. Method of Ballot Delivery to the Voter:  
☐ Taken by Voter \_\_\_\_\_  
☐ By Mail to this Address: \_\_\_\_\_  
☐ By Immediate Family Member of Voter  
Designated Here: \_\_\_\_\_  
(Name) (Relationship to Voter)  
☐ By this 3<sup>rd</sup> Person (Designated by the Voter): \_\_\_\_\_
6. Signature of Voter *OR* \_\_\_\_\_  
Immediate Family Member of Voter: \_\_\_\_\_ Date: \_\_\_\_\_
7. Signature of Immediate Family Member Returning the Ballot  
Relationship to Voter: \_\_\_\_\_  
(Complete Section #7 Only if Ballot was Delivered to the Voter or a Different Immediate Family Member of the Voter)

**AIDE CERTIFICATE** (Must be Completed if Applicant was Assisted as Designated Below)

If the voter received assistance in reading and/or signing this application, the person who assisted the voter must complete and sign this certificate.

I helped this voter: ☐ read the application ☐ sign the application ☐ read and sign the application

Signature of Aide \_\_\_\_\_ Printed Name of Aide \_\_\_\_\_

**Ballots received before the annual Town Meeting vote on June 1st will be rejected. All ballots must be received before the polls close at 8:00 p.m. on June 8, 2010 to be counted.**